



2675/141

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Attorney Docket No. 57,145 (46547)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): H. Katoh, et al. EXAMINER: Awad, A.
SERIAL NO.: 10/084,109 GROUP: 2675
FILED: February 27, 2002 CONFIRMATION NO.: 6866
FOR: DISPLAY DEVICE

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Handwritten signature/initials

RECEIVED

SEP 09 2004

Technology Center 2600

Dear Sir/Madam:

RESPONSE TO OFFICE ACTION

The following is in response to the Office Action mailed May 7, 2004 in the
above-referenced application.

11/17/2004 AIJHNS01 00000002 041105 10084109
01 FC:1202 720.00 DA

The Applicants believe that a one-month extension of time is required and respectfully petition therefor. The Applicants, however, conditionally petition for a further extension of time to provide for the possibility that such a petition has been inadvertently overlooked and is required. As provided below, charge Deposit Account 04-1105 for any required fee.

CERTIFICATE OF EXPRESS MAILING

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV438995095US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: September 3, 2004

Signature: *Lakeisha Bryant*

(Lakeisha Bryant)

09/08/2004 AIJHNS01 00000003 10084109

01 FC:1202

162.00 OP

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

01084109

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	34	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	123 minus 20= *	103
INDEPENDENT CLAIMS	1 minus 3 = *	
MULTIPLE DEPENDENT CLAIM PRESENT <input checked="" type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE ☐

OR OTHER THAN
SMALL ENTITY

RATE	FEE
BASIC FEE	370.00
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	FEE
BASIC FEE	740.00
X\$18=	1854
X84=	
+280=	280
TOTAL	

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 172 Minus	** 123	= 49
Independent	* 2 Minus	*** 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	8820
X84=	
+280=	
TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* Minus	**	=
Independent	* Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* Minus	**	=
Independent	* Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 - ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.